Page 1 of 2

## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10010186-1

| As a below named invention<br>My residence/post office  |                                  | -  | e as stated be                 | slow next  | to my name:                                     |  |  |
|---|----------------------------------|--|--------------------------------|--|---|--|--|
| I believe I am the origina<br>joint inventor (if plural n<br>patent is sought on the in<br>Electro-Optical Devices A                        | d, first a<br>names a<br>nventio | and sole inventor (if<br>the listed below) of<br>an entitled:      | only one nam<br>the subject n  | ie is listed<br>natter whi                         | below) or an o                                  | riginal, first and<br>and for which a  |  |
| the specification of which  |                                  | <del></del>  |                                |  | ecked:  |  |  |
| ( ) was filed on<br>Number  |                                  |  |                                |  |   | l Application                          |  |
| I hereby state that I have including the claims, as disclose all information we   | ve revid<br>amend<br>which is    | ewed and understo<br>ed by any amendm<br>material to patenta       | od the conte                   | nts of the   | above-identifice. I acknowled                   | ed specification,                      |  |
| Foreign Application(s) and/or C<br>I hereby claim foreign priority<br>inventor(s) certificate listed be<br>a filing date before that of the | benefits<br>low and              | under Title 35, United 3 have also identified belo                 | w any foreign ap               |  |   |  |  |
| COUNTRY   |                                  | APPLICATION NUMBER   | DATE                           | PLED   | PRIORITY CLAIMED                                | UNDER 35 U.S.C. 119                    |  |
|   |                                  | · <del></del>  |                                | ·  | YES:  | NC:                                    |  |
| Provisional Application   |                                  |  |                                | · <del></del>                                      | YES:  | NO:                                    |  |
| hereby claim the benefit und<br>below:  |                                  | CATION SERVAL NUMBER   | ·                              | G DATE   |   | арраланицај пака                       |  |
| <u> </u>  |                                  | · · · · · · · · · · · · · · · · · · ·                              |                                | <del></del>  |   |  |  |
| manner provided by the first period in Title application and the national or application and the national or application serial number      | 37, Code<br>PCT inte             | of Federal Regulations,  | Section 1.56(a)                | which occur  | red between the fill  materited/pending/abandon | ing date of the prior                  |  |
|   |                                  |  |                                |  |   |  |  |
| POWER OF ATTORNEY:<br>As a named inventor, I heret<br>business in the Patent and Trai<br>Customer N   | demark C                         |  | th:<br>Place<br>Numbe          | t(s) to prose<br>Customer<br>r Bar Code<br>el here | ecute this applicati                            | ion and transact all                   |  |
| Send Correspondence to:   |                                  |  | Dir                            | ect Telephor                                       | se Cails To:                                    |  |  |
| AGILENT TECHNOLOGIES,<br>Legal Department, 51U-PD   |                                  |  | Time                           | othy H. Joyc                                       | •   |  |  |
| Intellectual Property Administration P.O. Box 58043   |                                  |  | (660) 485-4310                 |  |   |  |  |
| I hereby declare that all made on information an with the knowledge thimprisonment, or both,  | statem                           | ents made herein cef are believed to b                             | e true; and f<br>is and the li | urther tha<br>ke so ma                             | t these stateme<br>de are punish                | ents were made<br>able by fine or      |  |
| talse statements may jed  | under S<br>opardize              | section 1001 of life<br>the validity of the                        | application or                 | any pater  | nt issued thereo                                | that such willful<br>in.               |  |
| Full Name of Inventor: <u>Gana</u>  | opardize                         | the validity of the  | application or                 | any pater<br>zenship: US                           | nt issued thereo                                | that such willful                      |  |
| Full Name of Inventor: Gana Residence: 111  | opardize<br>npati R.<br>4 W. K   | e the validity of the  Mauze  Inickerbocker Drive.                 | application or                 | any pater<br>zenship: US                           | nt issued thereo                                | that such willful                      |  |
| Post Office Address: Gana   | opardize<br>npati R.<br>4 W. K   | e the validity of the<br>Mauze<br>inickerbocker Drive.<br>Isidence | application or                 | any pater<br>zenship: US                           | nt issued thereo                                | ······································ |  |

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10010186-1

|     | Full Name of # 2 joint inventor: | Dan-Hui Yang                                     |             | Citizenship:   | CN          |  |  |  |  |
|-----|----------------------------------|--|-------------|----------------|-------------|--|--|--|--|
|     | Residence:                       | 1115 Blair Avenue, Sunnyvale, CA 94087           |             |                |             |  |  |  |  |
|     | Post Office Address:             | Same as Résidence                                |             |                |             |  |  |  |  |
|     | inventor s signature             | any t  | )<br>Date   | 5/2/0          | <u> </u>    |  |  |  |  |
|     | Full Name of # 3 joint inventor: |  |             | Citizenship: _ |             |  |  |  |  |
|     | Residence:                       |  |             |                | <del></del> |  |  |  |  |
|     | Post Office Address:             |  |             |                | <del></del> |  |  |  |  |
|     | inventor's signature             |  | Date        |                |             |  |  |  |  |
|     | Full Name of # 4 joint inventor: |  |             | Citizenship:   |             |  |  |  |  |
|     | Residence:                       |  |             |                |             |  |  |  |  |
| 111 | Post Office Address:             | <del></del>                                      | <del></del> |                |             |  |  |  |  |
| Ö   | Inventor's Signature             |  | Date        | <del></del>    | ~~~~        |  |  |  |  |
| T   | Full Name of # 5 joint inventor: |  | <del></del> | Citizenship:   |             |  |  |  |  |
|     | Residence:                       |  |             |                |             |  |  |  |  |
| UT. | Post Office Address:             |  |             |                |             |  |  |  |  |
|     | inventor's signature             |  | Date        |                |             |  |  |  |  |
| =   | Full Name of # 6 joint inventor: |  |             | Citizenship:   |             |  |  |  |  |
|     | Residence:                       |  |             |                |             |  |  |  |  |
|     | Post Office Address:             |  |             |                |             |  |  |  |  |
|     | Inventor's Signature             |  | Date        |                |             |  |  |  |  |
|     | Full Name of # 7 joint inventor: |  |             | Citizenship:   |             |  |  |  |  |
|     | Residence:                       |  |             |                |             |  |  |  |  |
|     | Post Office Address:             | <del>*************************************</del> |             |                | <del></del> |  |  |  |  |
|     | Inventor's Signature             |  | Date        | <del> </del>   |             |  |  |  |  |
|     | Full Name of # 8 joint inventor: |  |             | Citizenship:   |             |  |  |  |  |
|     | Residence:                       |  |             |                |             |  |  |  |  |
|     | Post Office Address:             |  |             |                |             |  |  |  |  |
|     | Inventor a Signature             | · · · · · · · · · · · · · · · · · · ·            | Data -      |                |             |  |  |  |  |